

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000049582

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA CARDIOLOGY EQUIPMENT, L.L.C.

**Current Principal Place of Business:**

2930 SE 31ST STREET  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2930 SE 31ST STREET  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 33-1148653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

THE MILLHORN LAW FIRM  
13710 US HWY 441  
SUITE 100  
THE VILLAGES, FL 32159 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** MILLHORN LAW FIRM

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** NASSER, ALI MD  
**Address:** 2930 SE 31ST STREET  
**City-St-Zip:** Ocala, FL 34471

**Title:** MGR  
**Name:** FERNS, JUSTIN MD  
**Address:** 2930 SE 31ST STREET  
**City-St-Zip:** Ocala, FL 34471

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** ALI NASSER

DR.

10/04/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date